Montana Medicaid Fee Schedule Elderly and Physically Disabled Home- and Community-Based Services Waiver July 1, 2013

		ription – Procedure code Montana description.	Case manager	ment teams w	ill indicate v	which procedu	ıre code	
	to use	e in order to assure correct coding.						
	Modi	fier – All Home- and Community-Based Service	es procedure c	odes must be	followed by	a UA modifi	er.	
	Other	modifiers to follow after UA modifier:			_			
		TE = nurse supervision/oversight (May be used						
		TS = follow-up service (may be used with proce	dure codes S0	0215, S5125, S	S5126, S51	30, T1002, T	1003, T1	005,
		T1019, T2003)			,			
		U9 = consumer is enrolled in the Bonanza optio	n.					
	Effec	<i>tive</i> – This is the first date of service for which the	he listed fee is	s applicable.				
	3.6.1							
	Meth	od – Source of fee determination			T			
		Fee Schedule: Medicaid fee for listed codes.						
		Rates listed are maximum paid. All rates may b						
		Providers must bill Medicaid the negotiated rate	agreed upon	with the case	managemer	it team or wit	the De	partment.
_		t. Providers agree to bill at the rate outlined in ic audits will take place and a recovery will oc	•	_		F Y 14. Provid	ders und	lerstand
	PA -	Prior Authorization						
		Y: Prior authorization is required						
		Space: Prior authorization is not required						
	•							
Proc	Mod	•	Effective	Unit	Method	Fee	PA	Wage Initiative
S5100		Adult Day Care	7/1/13	15 min	Fee Sched	\$2.08	Y	
T1016		Case Management	7/1/13	15 min	Fee Sched	\$14.73	N	
T2022		Case Management	7/1/13	day	Fee Sched	\$9.04	N	
T2024		Case Management plus Supported Living Coordination	7/1/13	day	Fee Sched	\$17.48	N	
T2038	UA	Community Transition Services Consultative Clinic and Therapeutic Services	7/1/11	service	Fee Sched	\$2,000.00 \$350.00	Y	
H2015 T2020	UA UA	Day Habilitation	7/1/11 7/1/13	service	Fee Sched Fee Sched	\$330.00 \$75.68	Y	
S5165		Modification	10/1/03	day	Fee Sched	\$4,000.00	Y	
T2039		Modification	10/1/03	service service	Fee Sched	\$4,000.00	Y	
T1027		Family Training & Support	7/1/13	15 min	Fee Sched	\$8.01	Y	
T2040		Financial Manager (do not use with U9 modifier)	7/1/13	month	Fee Sched	\$163.10	Y	
H2032		,	7/1/11	session	Fee Sched	\$175.00	Y	
H2032	UA	Health and Wellness	// 1/ 1 1		Fee Sched	\$55.00	Y	
H2032	UA	Health and Wellness Adaptive Recreational Therapy	7/1/11	session				1
H2032	UA	Health and Wellness Adaptive Recreational Therapy Exercise Classes	7/1/11 7/1/11	session	+			
H2032	UA	Adaptive Recreational Therapy Exercise Classes	7/1/11	class	Fee Sched	\$65.00	Y	
H2032	UA	Adaptive Recreational Therapy Exercise Classes Health Club Membership	7/1/11 7/1/11		Fee Sched Fee Sched	\$65.00 \$65.00		
		Adaptive Recreational Therapy Exercise Classes	7/1/11 7/1/11 7/1/11	class monthly	Fee Sched	\$65.00 \$65.00 \$45.00	Y Y Y	
S5130	UA	Adaptive Recreational Therapy Exercise Classes Health Club Membership Hippotherapy	7/1/11 7/1/11 7/1/11 7/1/11	class monthly session session	Fee Sched Fee Sched Fee Sched	\$65.00 \$65.00 \$45.00 \$175.00	Y Y	Y
S5130 S5131	UA UA UA	Adaptive Recreational Therapy Exercise Classes Health Club Membership Hippotherapy Wellness Classes	7/1/11 7/1/11 7/1/11	class monthly session	Fee Sched Fee Sched Fee Sched Fee Sched Fee Sched	\$65.00 \$65.00 \$45.00	Y Y Y Y	Y
	UA UA UA	Adaptive Recreational Therapy Exercise Classes Health Club Membership Hippotherapy Wellness Classes Homemaker	7/1/11 7/1/11 7/1/11 7/1/11 7/1/13	class monthly session session 15 min	Fee Sched Fee Sched Fee Sched Fee Sched	\$65.00 \$65.00 \$45.00 \$175.00 3.26 - 4.16	Y Y Y Y	Y
S5131	UA UA UA UA UA	Adaptive Recreational Therapy Exercise Classes Health Club Membership Hippotherapy Wellness Classes Homemaker Homemaker Chores	7/1/11 7/1/11 7/1/11 7/1/11 7/1/13 10/1/03	class monthly session session 15 min service	Fee Sched Fee Sched Fee Sched Fee Sched Fee Sched Fee Sched	\$65.00 \$65.00 \$45.00 \$175.00 3.26 - 4.16 \$250.00	Y Y Y Y Y Y Y	Y

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Proc	Mod	Description	Effective	Unit	Method	Fee	PA	Wage Initiative
S9470	UA	Nutritional Counseling, Dietician	7/1/13	15 min	Fee Sched	\$14.41	Y	
97003	UA	Occupational Therapy - Evaluation	7/1/13	visit	Fee Sched	\$57.78	Y	
97150	UA	Occupational Therapy - Group	7/1/13	15 min	Fee Sched	\$11.79	Y	
97530	UA	Occupational Therapy - Individual	7/1/13	15 min	Fee Sched	\$23.80	Y	
T2025	UA	Limit	7/1/11	session	Fee Sched	\$650.00	Y	
T2025	UA	Acupuncture	7/1/11	session	Fee Sched	\$70.00	Y	
T2025	UA	Chiropractic	7/1/11	session	Fee Sched	\$75.00	Y	
T2025	UA	CrainioSacral Therapy	7/1/11	session	Fee Sched	\$70.00	Y	
T2025	UA	Hyperbaric Oxygen Therapy	7/1/11	session	Fee Sched	negotiated	Y	
T2025	UA	Massage Therapy	7/1/11	session	Fee Sched	\$70.00	Y	
T2025	UA	Mind-Body Therapies (Such as Hypnosis and	7/1/11	session	Fee Sched	\$125.00	Y	
T2025	UA	Specialized Nursing Services	7/1/11	session	Fee Sched	\$70.00	Y	
T2025	UA	Pain Mitigation Counseling/Coaching	7/1/11	treatment	Fee Sched	\$650.00	Y	
T2025	UA	Reflexology	7/1/11	session	Fee Sched	\$70.00	Y	
T1019	UA	Personal Assistance Attendant - Agency-Based	7/1/13	15 min	Fee Sched	\$4.54 - \$5.05	Y	Y
T1019	TE	Personal Assistance Nurse Supervision - Agency-Based	7/1/13	15 min	Fee Sched	\$4.54 - \$5.05	Y	Y
T1019	UA	Personal Assistance Attendant -Self-Directed	7/1/13	15 min	Fee Sched	3.75 - \$4.23	Y	Y
T1019	TE	Personal Assistance Oversight - Self-Directed	7/1/13	15 min	Fee Sched	3.75 - \$4.23	Y	Y
T1020	UA	Personal Assistance Attendant - Per Day	7/1/13	day	Fee Sched	\$9.93	Y	
S5161	UA	Personal Emergency Response - Rental	10/1/03	month	Fee Sched	\$69.00	Y	
S5160	UA	Testing	10/1/03	item	Fee Sched	\$100.00	Y	
S5162	UA	Personal Emergency Response System - Purchase	10/1/03	item	Fee Sched	\$800.00	Y	
97001	UA	Physical Therapy - Evaluation	7/1/13	visit	Fee Sched	\$50.89	Y	
97150	UA	Physical Therapy - Group	7/1/13	15 min	Fee Sched	\$11.79	Y	
97530	UA	Physical Therapy - Individual	7/1/13	15 min	Fee Sched	\$23.80	Y	
H2001	UA	Post Acute Rehabilitation	7,1,10	10 11111	T co Senica	\$20.00		
H2001	UA	Community Residential Rehabilitation	7/1/13	day	Fee Sched	\$731.00	Y	
H2001	UA	Comprehensive Day Treatment	7/1/13	hour	Fee Sched	\$97.46	Y	
T2015	UA	Prevocational Services	7/1/13	hour	Fee Sched	\$7.38	Y	
T1003	UA	Private Duty Nursing - LPN	7/1/13	15 min	Fee Sched	\$7.01	Y	
T1003	UA	Private Duty Nursing - RN	7/1/13	15 min	Fee Sched	\$8.30	Y	
T1002	_	Registered Nurse Supervision	7/1/13	15 min	Fee Sched	\$11.47	Y	
11001	UA	Residential Habilitation	7/1/13	13 11111	T CC SCHCU	φ11.47	1	
T2031	UA	Homes	7/1/13	day	Fee Sched	\$71.79	Y	
S5145	UA	Res Hab - Child Foster Care	7/1/13	-	Fee Sched	\$102.76	Y	
T2016		Res Hab - Group Home	7/1/13	day	Fee Sched	148.74	Y	
	UA UA	Res Hab - TBI-AR		day	Fee Sched	102.76	Y	
T2016 G0238	UA	Respiratory Therapeutic Procedures	7/1/13	day	Fee Sched	\$8.30	Y	
99503	UA	Respiratory Therapy	7/1/13 9/1/11	15 min visit	Fee Sched	\$25.00	Y	
T1005	+	Respite Care		15 min	Fee Sched	3.26 - 4.16	Y	Y
		1	7/1/13					1
H0045	UA	Respite Care - Assisted Living & Adult Foster Care	7/1/13	day	Fee Sched	\$161.75	Y	
H0045	UA	Respite Care - Hospital	10/1/03	day	Fee Sched	\$360.00	Y	
H0045	UA	Respite Care - Nursing Facility	7/1/13	day	Fee Sched	rate	Y	
S5135	UA	Senior Companion	7/1/13	15 min	Fee Sched	\$1.27	Y	
T2027	UA	Special Child Care for Children	7/1/13	15 min	Fee Sched	\$5.32	Y	
T2029	UA	Specialized Medical Equipment	10/1/03	item	Fee Sched	\$2,000.00	Y	
T2028	UA	Specialized Medical Supplies	10/1/03	item	Fee Sched	\$2,000.00	Y	**
S5125	UA	Specially Trained Attendant	7/1/13	15 min	Fee Sched	\$5.32	Y	Y
S9124	UA	Specially Trained Attendant - LPN	7/1/13	15 min	Fee Sched	\$7.01	Y	
S9123	UA	Specially Trained Attendant - RN	7/1/13	15 min	Fee Sched	\$8.30	Y	
92506	UA	Speech Therapy - Evaluation	7/1/13	visit	Fee Sched	\$147.60	Y	
92508	UA	Speech Therapy - Group	7/1/13	15 min	Fee Sched	\$14.10	Y	
92507	UA	Speech Therapy - Individual	7/1/13	15 min	Fee Sched	\$48.40	Y	
T2019	UA	Supported Employment	7/1/13	15 min	Fee Sched	\$12.36	Y	

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Proc	Mod	Description	Effective	Unit	Method	Fee	PA	Wage Initiative
T2033	UA	Supported Living	9/1/11	day	Fee Sched	\$213.20	Y	
S0215	UA	Transportation – Miles	10/1/08	mile	Fee Sched	\$0.33	Y	
T2003	UA	Transportation – Trip	9/1/11	trip	Fee Sched	\$12.16	Y	

Services listed below are billed only by Financial Managers and Independent Advisors approved by the Senior & Long Term Care Division and for consumers who are enrolled in the Bonanza option.

Proc	Mod	Description	Effective	Unit	Method	Fee	PA	
S5126	UA	Community Supports Services	7/1/13	15 min	Fee Sched	\$5.32	N	
S5126	UA	Community Supports Services - Transportation Miles	9/1/11	mile	Fee Sched	\$0.51	N	
T2040	U9	Financial Manager	7/1/13	month	Fee Sched	\$163.10	N	
S9986	U9	Goods and Services (other than supplies)	7/1/06	service	Fee Sched	\$500.00	N	
T5999	U9	Goods and Services (supplies)	7/1/06	item	Fee Sched	\$500.00	N	
T2041	U9	Independence Advisor	7/1/13	month	Fee Sched	\$163.10	N	
T1000		Private Duty Nursing	7/1/13	15 min	Fee Sched	\$8.30	N	
A0080	UA	Transportation Miles	3/1/11	mile	Fee Sched	\$0.51	N	
* Nursing Facility Medicaid rate can be found on http://www.dphhs.mt.gov/sltc/services/nursingfacilities/Medicaid/IndexMedicaidRates.shtml.								